

Best Available Copy



CLAIMS ONLY							SERIAL NO.		FILING DATE		
							APPLICANT(S)				
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1	/						51				
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47							97				
48							98				
49							99				
50							100				
TOTAL IND.		↓		↓		↓	TOTAL IND.		↓		↓
TOTAL DEP.		↓		↓		↓	TOTAL DEP.		↓		↓
TOTAL CLAIMS							TOTAL CLAIMS				

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS